

<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	10/609,227-Conf. #7562
	Filing Date	June 26, 2003
	First Named Inventor	Narayan Sundararajan
	Art Unit	1743
	Examiner Name	N. A. Levkovich
	Attorney Docket Number	21058/0206736-US0

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 07278

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with  
Customer Number:

07278

OR

☐ Firm or  
Individual Name

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE OF Applicant or Assignee of Record**

Signature

*Ram Madlock*

Name

*Ram Madlock*

Date

*5-21-07*

Telephone

*408-765-1144*

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐

\*Total of 1 forms are submitted.